Recent developments in the field of biomedicine do not only constitute a challenge for the health care systems of modern societies. They also have a profound impact on the core concepts of individual and collective life. The corresponding changes of individual and social identities take place within the framework of different historically shaped national conditions and traditions. This leads to ways of dealing with biomedicine that vary between cultures and to different perspectives on chances and risks.

**Context and Project Objectives**
This interdisciplinary project aimed at exploring the interrelation between socio-cultural conditions and public perceptions of medical research and practice. It posed the question to what extent concepts of identity on the socio-cultural, bioethical and political level are influenced by biomedicine and, conversely, shape and regulate biomedical practices themselves.

The socio-cultural background of modern biomedicine was examined in a comparative analysis of qualitative empirical data gathered in different European countries: Austria, Cyprus, France, Germany, the Netherlands, and Sweden. Moreover, perspectives from Latvia and Great Britain were taken into account selectively.

The emphasis of the project lies on the question how laypeople and patients view modern biomedicine and live with it. The interactions and interdependencies between medicine and socio-cultural contexts were analysed along two main comparative axes. On a first level the societal framings and discussion in countries involved were compared to trace different cultural approaches. Secondly, two different medical technologies, organ transplantation and postnatal genetic testing, were used as comparative examples. These two technologies represent different concepts of biomedicine as well as raise different ethical and social problems and hence challenges for governance.

On this basis, the CoB project developed conclusions and recommendations for the academic context as well as for European and national policy makers. These address questions of European harmonisation, citizen participation and governance as well as bioethical issues.

**Project phases:**
The project consisted of three work stages:

1. **Reconstruction:** In the first part of the project, the ethical, legal and sociological state of the art concerning organ transplantation and postnatal genetic testing (e.g. in the context of breast cancer prevention) was reconstructed as well as the country-specific framework of the ethical, legal and political discourse (exemplarily in Austria, Cyprus, Germany, France, Sweden and the Netherlands). Qualitative empirical research on how biomedical options are dealt with and on attitudes of patients and laypeople towards biomedicine were carried out by means of group discussions. This allowed for a differentiated insight in the different structures of argumentation and opinions of groups of laypeople. Additionally, there were qualitative ethnological interviews with laypeople and patients and long-term ethnographic observations in the respective countries. Thus the reconstruction of medical practices with regards to the respective ethical, legal and economic standards they establish came to the fore.

2. **Analysis:** In the second phase of the project, a country-specific and a comparative cross-national analysis of the relation and the interactions between laypeople/patients and science took place. The forms of cultivating identity and dealing with bodily integrity were analysed as well. Moreover, a detailed examination of the interdependency of socio-cultural identity and biomedical
practice was carried through in the framework of three sub-projects focusing on different aspects. These sub-projects took up the medical, ethical and legal discussions in the single countries and reflected them in the light of the results from the empirical investigations.

- **Sub-project 1** focused on forms and effects of the so-called geneticisation and medicalisation from the point of view of science and technology studies and will trace their effects on concepts of body, gender and disease in different countries.
- **Sub-project 2** did not only examine - against the background of discussions about ‘Public Understanding of Science’ - the positioning of laypeople towards biomedical knowledge. It also investigated their views on the regulation of science and on possible forms of public participation in decision-making processes of science policy in this field.
- **Sub-project 3** was concerned with specific bioethical, religious, political and ethical aspects of the participation of laypeople and patients in decisions of research policy and with the conditions for an intercultural discourse on bioethics.

### 3. Evaluation and practical-ethical consequences

In the last part of the project, the synopsis of the single aspects generated an overall perspective. The analyses of the interfaces between cultural views on biomedicine, bioethical reflection and political regulation from the sub-projects 1, 2 and 3 was scanned for similarities and differences between the different countries and cultures. On this basis, a concluding discussion addresses the question to what extent a reasonable way of dealing with plurality and cultural diversity in the context of the biomedical practice in Europe can be combined with conceptions of authoritative and unified European standards and forms of regulation. At the same time, possibilities and limits of participation in bioethical issues on local and European level are discussed in a normative and practical perspective.

Concretely we aimed at:

- Qualitative comparative research on different socio-culturally framed ways of dealing with modern biomedicine in selected European countries
- Investigation on how members of the public assess the impact of modern biomedical technologies on their body, identity, ways of knowing and social relations
- Analysis of how European citizens reflect on the socio-political consequences of modern biomedical technologies, different modes of governance as well as opportunities of public participation
- Investigation of the role of cultural concepts like identity and bodily integrity in the present bioethical discourse
- Reflection and evaluation of the consequences of the cultural plurality of moral conceptions on the debate on European bioethics
- Recommendations for the development of ethical regulations and possibilities of governing research and practise in the field of medicine and life sciences

The methodological and theoretical objectives were:

- Contribution to interdisciplinary research at the interface of bioethics, social studies of science and technology (STS) and medical anthropology
- Advancement of qualitative comparative methods for investigating patients’ and laypeople’s attitudes towards questions of biomedicine in an international and interdisciplinary research setting
- Development of key concepts for an intercultural bioethical discourse
- Establishment and structuring of a European network for the exploration of biomedicine from an ethical and social science point of view

### Composition of the Consortium Involved:

- University of Vienna, Austria, Department of Social Studies of Science, Prof. Dr. Ulrike Felt (AT-UV) [www.univie.ac.at/virusss], Administrative co-ordinator from April 1, 2005
- Humboldt-University at Berlin, Germany, Department of European Ethnology, Prof. Dr. Stefan Beck (DE-UBER) [http://www2.rz.hu-berlin.de/ethno]
- University of Lund, Sweden, Centre for Theology and Religious Study, (Dr. Helena Röcklinsberg [www.teol.lu.se] (SE-ULUND/TH) & Department. of European Ethnology, Prof. Dr. Susanne Lundin (SE-ULUND/IE) [www.lu.se/o.o.i.s/1442]
• Makarios III Medical Centre, Cyprus, Nicosia Dept. of Clinical Genetics, Dr Violetta Christofidou Anastasiadou (CY-MMC) [www.cing.ac.cy/cing.html]
• University of Utrecht, the Netherlands, Institute for Ethics, Prof. Dr. Marcus Düwell (NLUU) [www.phil.uu.nl/en]
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• Contractor from January 1, 2006: University of Leeds, UK, Institute of Health Sciences and Public Health Research, Prof. Dr. Darren Shickle (UNIVLEEDS) [www.leeds.ac.uk/hsphr]
• Contractor from January 1, 2006: University of Goettingen, Germany, Department of Medical Ethics and History of Medicine, Prof. Dr. Silke Schicktanz (UKG-GOE) [www.egm.med.uni-goettingen.de]

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• Contractor and administrative co-ordinator until the March 31, 2005: Max Delbrueck-Center for Molecular Medicine, Berlin, Germany, RG Bioethics and Science Communication, Dr. Christoph Tannert (DE-AGB) [www.bioethics-discourse.de]
• Contractor until the December 31, 2004: University of York, GB, Centre for Health Economics, Dr. Michael Kuhn (GB-UY) [www.york.ac.uk/inst/che/index.htm]
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